



Opioid Awareness in Indiana



General Information

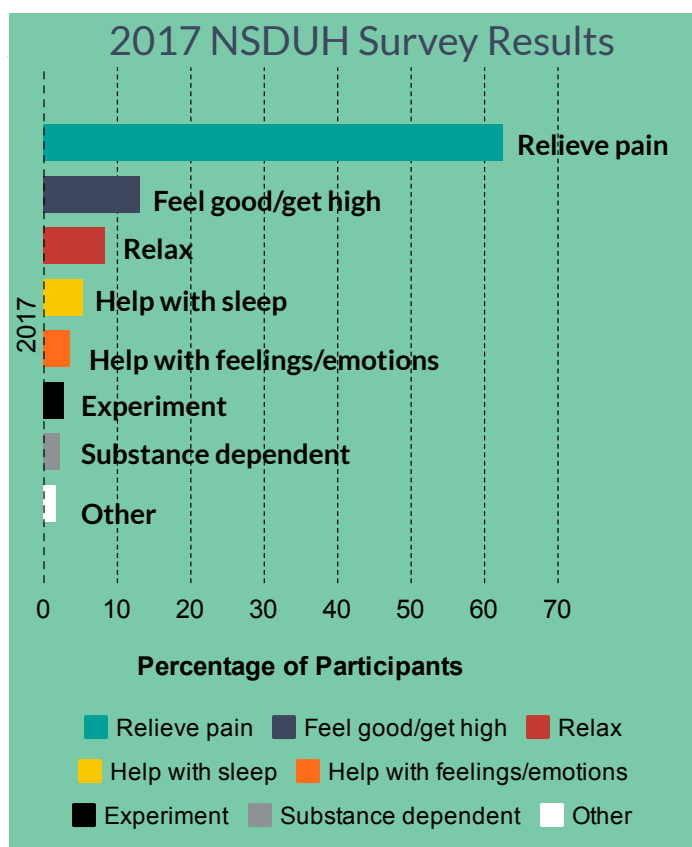
What are opioids?

Opioids are a class of drugs that can be used to reduce pain. They include drugs that are made illegally and those prescribed by a doctor. Opioids are used medicinally as an analgesic (painkiller), hypnotic (sleep inducing), antitussive (cough suppressant) and anti-diarrheal. These drugs can be misused, leading to addiction, also known as substance use disorder, or even death. Opioids can be injected, smoked or snorted. Everyone is at risk for opioid addiction. It is important to know that substance use disorder is a disease. It changes the way that the brain works and disrupts the brain's normal hierarchy of needs and desires by replacing new priorities connected with getting and using the drug. The behaviors that result from this disorder weaken the ability to control impulses, regardless of the negative consequences.

Why do people take opioids?

Among participants (12 years and older) in the 2017 National Survey on Drug Use and Health (NSDUH) who misused prescription pain relievers at least once in the past year, the most commonly identified reason for their last misuse of a pain reliever was to relieve physical pain. Even if the reason for misuse was to relieve physical pain, it is still considered misuse to take a drug not prescribed to you or to take a higher dosage or more often than prescribed. Other commonly listed reasons for misuse (at least once in the past year) were to feel good or get high and to relax or relieve tension. Less common reasons included to help with sleep, to help with feelings or emotions, to experiment or see what the drug was like, and because they were substance dependent.

Source: <https://www.samhsa.gov/data/sites/default/files/NSDUH-FFR1-2016/NSDUH-FFR1-2016.pdf>



Signs of opioid misuse

- Red, watery eyes, large or small pupils
- Runny nose or hacking cough
- Cold, sweaty palms or shaky hands
- Poor physical coordination
- Puffy or pale face
- Changes in mood, weight or grades
- Lack of energy for school, practice or other activities

Fentanyl

Fentanyl is a common synthetic opioid pain reliever that can be manufactured both legally and illegally. It can be mixed with heroin and cocaine either with or without the user's knowledge. It can be 50-100 times more potent than morphine.

For more general information, including common definitions and drug-related terms and acronyms, visit:
<https://www.in.gov/isdh/27387.htm>

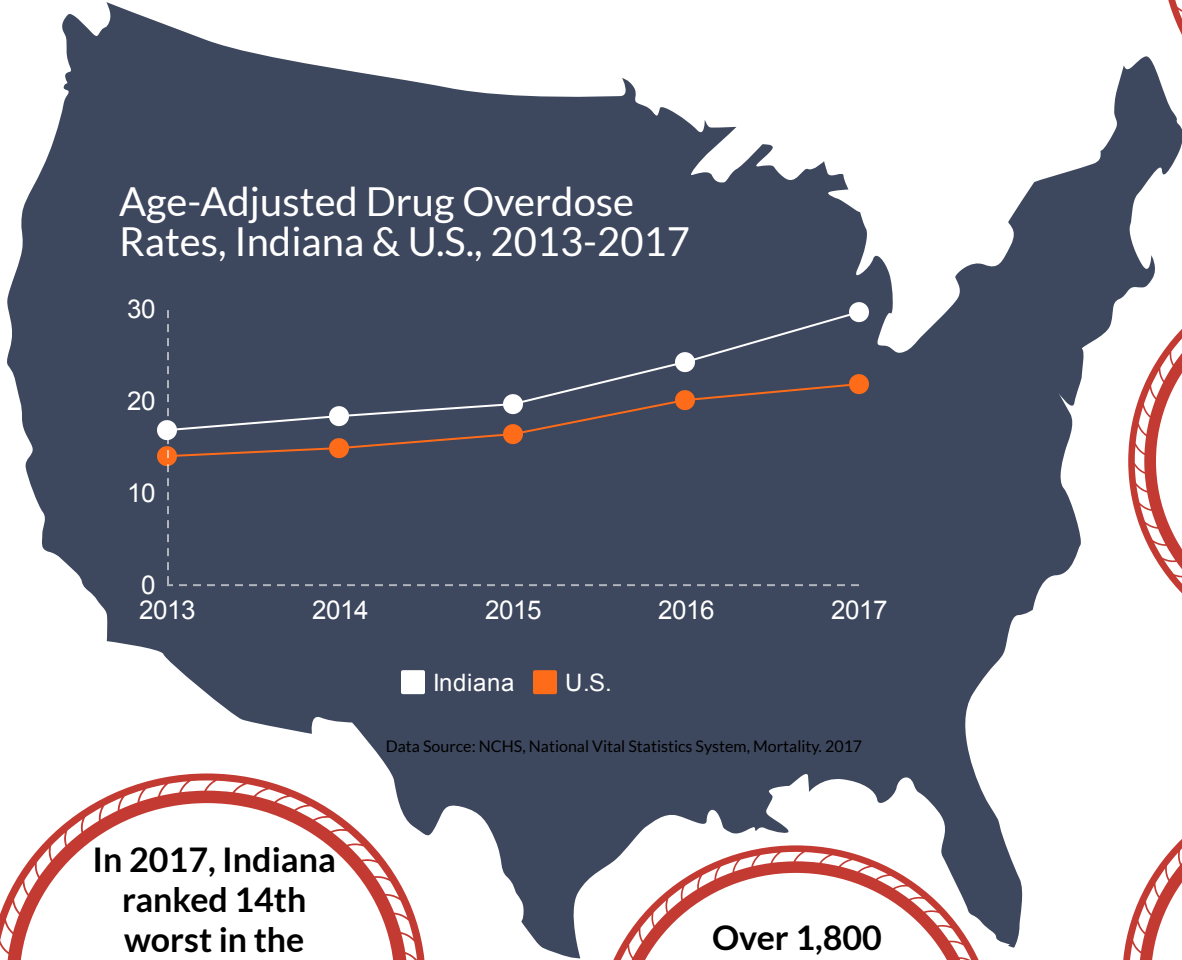
In the United States ...

more than 700,000 people have died from a drug overdose from 1999-2017, and more than 57% of these involved an opioid. The rise in opioid-involved overdoses has come in three distinct waves: The first wave in the 1990s involved prescription opioids, the second wave beginning in the 2000s, was marked by increases in heroin involved deaths, and the third wave involved large increases in deaths involving synthetic opioids, primarily driven by illicitly manufactured fentanyl.

In 2017 alone,

- 17% of Americans had at least one opioid prescription filled, but the national opioid prescribing rate had fallen to the lowest it has been in more than 10 years.
- On average, 130 people died each day due to an opioid-involved overdose.
- Deaths involving synthetic opioids, such as fentanyl, increased 47% from the previous year and contributed to approximately 41% of overdose deaths.

Drug overdose deaths increased in Indiana by **883%** from 1999-2017, which was a loss of more than 15,000 Hoosiers.



Drug overdose fatalities cost Indiana **\$1.5 billion** each year.

In 2017, Indiana ranked **14th worst** in the nation in drug deaths with a rate of **29.4** per 100,000 people.

Over **1,800** Hoosiers died due to drug overdose in 2017, which is an average of **five** people per day.

Since 2007, Hoosiers have been **more likely to die** due to drug overdose than a car accident.

Indiana drug overdose statistics, 2017

- **63% involved opioids**
but other drugs contributed ...
 - 16% involved benzodiazepines
 - 13% involved cocaine
 - 16% involved psychostimulants other than cocaine, such as amphetamines
- **64% were male** but overdose rates increased for both sexes and all races from 2016-2017.
- **Those age 25-34** had the highest risk of overdose at 57.5 per 100,000 but those age 35-44 had a similar rate of 57.2 per 100,000.

What happens during an overdose?

A person suffering an opioid overdose may present with some or all of the following symptoms:

- Unusual sleepiness and inability to awaken the person with a loud voice or by rubbing your knuckles firmly on their chest (sternum)
- Breathing problems, including slow or shallow breathing
- The pupil (black circle in the center of the eye) is very small, sometimes called “pinpoint pupils”
- Gurgling or choking noises
- Body is limp
- Heart rate slows or stops
- Blue lips and/or nails

What to do if someone is having an overdose:

1. Immediately administer naloxone according to directions given to you by your pharmacist and/or located on the naloxone kit and call 911.
2. If you are trained, do CPR
3. If there is no change in 3-5 minutes after giving naloxone administer another dose.
4. Stay with the person until first responders arrive
5. Tell the first responders that you gave naloxone and at what time and show them the dose.

Naloxone: the overdose reversal drug

No matter where you are, you can take action to end the opioid overdose epidemic. One way to do so is to be prepared in the case that someone overdoses on opioids. The most effective way to counter an overdose is by administering the opioid-reversal medication naloxone.

What is naloxone? Naloxone, also known by the brand name Narcan®, is a drug that reverses the effects of opioid overdose. Naloxone can be given to anyone with symptoms of an opioid overdose. Naloxone only reverses the effects of opioids such as heroin, methadone and morphine. However, many people who overdose have taken multiple drugs, including opioid pain relievers. Even if you are unsure of what drugs the person has taken, you can safely administer naloxone. If the person has not used any opioids, naloxone will not work and will not cause any additional harm.

Naloxone does not make you high. The only result of naloxone is to reverse the effect of opioids. Naloxone is not an opioid and has no potential for misuse or dependency. It is not possible to overdose on naloxone.

Note: Even if the person becomes conscious and resumes breathing, it is important to call 9-1-1 and have trained medical professionals assess the condition of the person who overdosed. Oftentimes, a person will need more than one dose of naloxone to treat the overdose. Additionally, sometimes people who overdose may develop other health problems, such as seizures, pneumonia or heart conditions.

For more information on naloxone, visit:

<https://www.in.gov/isdh/27387.htm>

Aaron's Law and Overdose Good Samaritan Law

You may have heard these terms previously, but what do they mean? Here are some key points:

Requirements to receive protection under the laws:

1. Administer naloxone to a person suffering an overdose.
2. Contact emergency services (911).
3. Wait for EMS and police to arrive at the scene.
4. Provide all relevant information requested by law enforcement and cooperate at the scene.

If an individual follows ALL of the requirements above, they are protected from:

- Drug possession
- Practicing medicine without a license
- Being sued by the person Naloxone was administered to

But they are NOT protected from:

- Parole or probation violations
- Public intoxications, trespassing or other crimes committed at the scene

Individuals NOT protected under the laws:

- The person who suffered the overdose
- Those who administer naloxone but do not call emergency services
- Other people at the scene who do not follow the requirements above



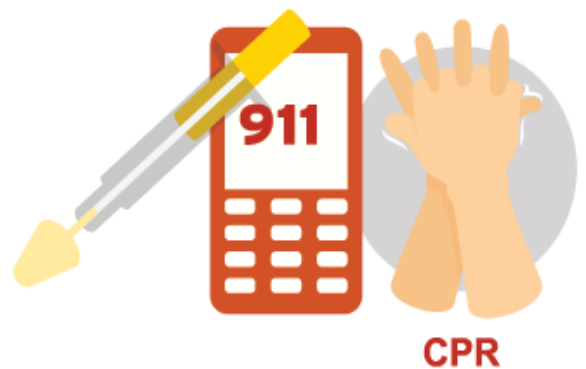
Optin Registry

- No prescription is needed to obtain or carry naloxone. To locate naloxone, visit: <https://optin.in.gov>.
- Select "Locate Current Naloxone Entities."
- Enter the search criteria in the filter box and select "Filter."
- Hover over the pins for name, phone number and address.

Learn how to be prepared in the event of an opioid overdose.

Free naloxone training is available for interested organizations, local health departments, non-profits, churches, etc. This training is approximately one hour in length and covers:

- The chronic disease of addiction
- Causes and conditions of the opioid crisis
- Signs and symptoms of prescription opioid and heroin use
- Signs and symptoms of overdose
- The overdose reversal drug naloxone
- The administration of naloxone



It is **legal** for anyone to carry a naloxone rescue kit, as long as it is purchased or given away for free by an entity registered to distribute naloxone.



Reach out to Audrey Rehberg if you are interested in scheduling a naloxone training:

arehberg@isdh.in.gov

To view a heat map that shows locations of reported patient encounters in which naloxone was administered, visit:

<https://www.in.gov/isdh.28002.htm>

53%

of participants in the National Survey on Drug Use and Health (NSDUH) indicated that they misused painkillers from friends and family more than any other source in 2017.

60,000

young children end up in the emergency department each year because they ingested medications while an adult was not looking.

What can you do?



These emergency department visits can be prevented by ensuring that medications are put up and away out of sight.

Some steps that you can take include: putting medications away every time, making sure the safety cap is locked, teaching children about medication safety and even using a medication lock box and not giving away the key or combination. Be sure to dispose of unused medications at an Rx drop-off location, and ask friends and family members to do the same.



EVERY 9 MINUTES,
a young child (under age 6) goes to the ER because he/she got into medicine, and



EVERY HOUR,
a young child is hospitalized, and



EVERY 12 DAYS
a young child dies.



To find the nearest Rx drop-off location, visit:

<http://rxdrugdropbox.org/map-search/>

Call the Poison Control Center at 800.222.1222 right away if you think a child might have gotten into medicine, even if you are not completely sure.

HELP REDUCE STIGMA Language Matters

SAY THIS



NOT THIS

Person with opioid use disorder	Addict, user, druggie, junkie, abuser
Disease	Drug habit
Person living in recovery	Ex-addict
Person arrested for a drug violation	Drug offender
Substance dependent	Hooked
Medication is a treatment tool	Medication is a crutch
Had a setback	Relapsed
Maintained recovery; substance-free	Stayed clean
Negative drug screen	Clean
Positive drug screen	Dirty drug screen

Reducing the stigma

Stigma is a mark of disgrace associated with a particular circumstance, quality or person that may set a person or a group of people apart. When people are labeled primarily because of their opioid use disorder, they are being negatively stereotyped. Language that includes biased and hurtful words can lead to discrimination and social exclusion. Stigma and discrimination are barriers to acknowledging the problem, seeking and accessing treatment and ultimately to recovery.

Language is powerful - especially when talking about addiction. This table shows some examples of stigma reducing language that should be used.

To learn more about the Know the O Facts Campaign, visit:
www.knowtheofacts.org



Treatment

Medication-assisted treatment, coupled with counseling, is the preferred treatment for opioid use disorder. Taking medication for an opioid addiction is like taking medication for any other chronic disease, like diabetes or asthma. Numerous studies have shown that medications can reduce cravings, relapses and overdoses when taken as prescribed.

To access help with substance use disorder treatment, visit

<http://www.in.gov/fssa/addiction/>

or call
2-1-1

To access help with mental health and addiction treatment, visit

<https://findtreatment.samhsa.gov>

or

<http://www.mentalhealthamerica.net/finding-help>

or call SAMHSA National Helpline at

1-800-662-4357

If you are in crisis, please seek help immediately. To reach a 24-hour crisis center, call

1-800-273-8255

text MHA to 741741,

call 9-1-1,

or go to the nearest emergency room



Medication not working?

Trying to manage pain outside of your care provider's advised use can have very serious side effects and can even lead to death. If you are in pain and your medication is not working well enough, it can be tempting to stop taking the medication or even increase the dosage. It is important to take any and all medications only as directed by your doctor.

When you talk to your doctor:

- Tell about all of the medications you take, including prescriptions, over-the-counter medications, vitamins, supplements and herbal medications.
- Describe what has happened since your last visit.
- Verify that you were prescribed the right medications.
- Ask what the medication is supposed to do and when it will start working.
- Write down any information the health care provider gives you about making a change in your treatment.
- Ask questions if the health care provider's instructions are unclear.
- Ask about other possible treatment options.

Other helpful ISDH resources:

The Indiana State Department of Health is committed to providing support to every community's effort to combat the opioid epidemic.

If you are interested in finding more information, there are more materials available for downloading and printing at:
<https://www.in.gov/isdh/27758.htm>

To view, print or download, click on the title of the handout you are interested in to open it. You will then be able to view and use the PDF of each handout as needed.

You can subscribe to the Drug Overdose Prevention Newscast weekly emails by selecting a "[Click to subscribe](#)" link at the top of any page on the ISDH Overdose Prevention website.

To further support the creation of a healthier Indiana, ISDH Division of Trauma and Injury Prevention has created a mobile education exhibit to share resources regarding opioids. This exhibit can be tailored to fit your meeting, conference, and presentation needs.

If you would like to invite us to your event, complete a request form by visiting:
<https://www.in.gov/isdh/27757.htm>



Indiana State
Department of Health

